PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

maintenance fee notifica	ed below or directed oth tions.	nerwise in Block 1, by (rders and notification of a a) specifying a new corres	spondence address	; and/or (b) indicating	a separate	"FEE ADDRESS" fo	
current correspond 466 YOUNG & TH	ENCE ADDRESS (Note: Use Bi 7590 03/04	Fee	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission					
209 Madison Street Suite 500 Alexandria, VA 22314				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
,							(Depositor's name)	
							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET	NO. C	CONFIRMATION NO.	
10/593,895 TITLE OF INVENTION	11/21/2006 T: FIELD DEVELOPME	NT WITH CENTRALIS	Hein Wille Jac ED POWER GENERATIO		2001-1464		5800	
A PORT N. MICHIEL			T	T	· · · · · · · · · · · · · · · · · · ·			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	· · · · · · · · · · · · · · · · · · ·		DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0 1	\$1810	1	06/06/2011	
EXAMINER BEACH, THOMAS A		3671	CLASS-SUBCLASS 166-350000]				
1. Change of correspondence address or indication of "Fee Address"			2. For printing on the p	atent front page, li	st			
CFR 1.363). Change of corresp Address form PTO/SI	ondence address (or Cha B/122) attached.	nge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a					
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
			THE PATENT (print or typ					
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
SINGLE BU	OY MOORING	S INC.	Marly, SWITZ	Marly, SWITZERLAND				
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government								
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee A check is enclosed.								
Publication Fee (N	To small entity discount p	Payment by credit card. Form PTO-2038 is attached.						
Advance Order - #	of Copies 2	· · · · · · · · · · · · · · · · · · ·	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number					
5. Change in Entity Sta	,	,	if necessary b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).					
	s SMALL ENTITY statu		☐ b. Applicant is no lon					
interest as shown by the	records of the United Sta	tes Patent and Trademark	d from anyone other than to c Office.	ne applicant; a reg	istered attorney or agen	it; or the as	ssignee or other party in	
Authorized Signature	M	MM		DateJ	une 1, 2011			
Typed or printed name Robert J. Patch			Registration No17,355					
an application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	dapplication form to the ons for reducing this bur lirginia 22313-1450. DO 13-1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to th NOT SEND FEES OR	on is required to obtain or r 1.14. This collection is est depending upon the indivi- e Chief Information Office COMPLETED FORMS TO	imated to take 12 idual case. Any co or, U.S. Patent and O THIS ADDRESS	minutes to complete, in omments on the amoun Trademark Office, U.S. SEND TO: Commiss	ncluding ga ut of time y S. Departm sioner for P	thering, preparing, and you require to complete tent of Commerce P.O.	

tion Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.